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Fax Message

TO:	Examiner Paul V. Ward
APPLICATION NO.:	10/609,147, filed June 27, 2003
CONFIRMATION NO.:	6705
FAX:	(703) 872-9306
FROM:	Michael C. Badia, Reg. No. 51,424
DATE:	October 12, 2004
SUBJECT:	Attorney Docket No. VPI/02-110 US
TOTAL # OF PAGES:	22


Message or Comment

Attached are the following documents:

1. Transmittal Letter (2 pages, in duplicate);
2. Amendment and Response to Office Action/Restriction Requirement (15 pages);
3. Petition for a Two-Month Extension of Time (1 page, in duplicate).

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any documents referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile Number: (703) 872-9306 on this 12th day of October 2004.


Anne V. Moylan

If any problems occur with this fax transmittal, please call (617) 444-6396 immediately.

FAX Number (617) 444-6483 Legal Department

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Paul V. Ward
Group : 1623
Applicants : Ronald Knegtel et al.
Serial No. : 10/609,147
Confirmation No. : 6705
Filed : June 27, 2003
For : CASPASE INHIBITORS AND USES THEREOF

Cambridge, Massachusetts
October 12, 2004

Mail Stop Amendment
Commissioner for Patents
P.O.Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☐ an Amendment; ☒ a Reply to Office Action; ☐ Appendix I;
☒ Petition for Extension of Time; ☐ a Supplemental Amendment; ☐ a substitute Specification; ☐ a
Declaration; ☐ a Supplemental Declaration; ☐ a Power of Attorney; ☐ an Associate Power of Attorney;
☐ formal drawings; ☐ Notice of Appeal; ☐ Exhibits A & B; to be filed in the pabove-identified patent
application.

FEE FOR ADDITIONAL CLAIMS

- ☒ A fee for additional claims is not required.
- ☐ A fee for additional claims is required.
- ☐ A check in the amount of \$___ in payment of the filing fee is transmitted herewith.
- ☒ The Director is hereby authorized to charge payment of any filing fees required under 37 C.F.R.
§ 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to
deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge \$_____ to Deposit Account No. 50-0725 in payment of the filing fee. A
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Application No.: 10/609,147
Applicants: Ronald Knegt et al.
Page 2


EXTENSION FEE

[X] The following extension is applicable to the Response filed herewith; [] \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [X] \$420.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [] \$950.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [] \$1,480.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); \$2,010.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).

[] A check in the amount of [] \$110.00; [] \$420.00; [] \$950.00; [] \$1,480.00; [] \$2,010.00 in payment of the extension fee is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

[X] Please charge the [] \$110.00; [X] \$420.00; [] \$950.00; [] \$1,480.00; [] \$2,010.00; extension fee to Deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.



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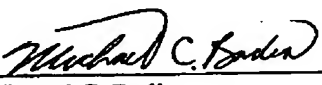
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